Application or Docket Number\_ 2

Approved for use through 7/31/2006, OMB 0651-0032 U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it displeys a valid OMB control number PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875							101 17111 610		
APPLICATION AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY		OR	OTHER THAN	
FOR	· NU	ABER FILED	NUMB	ER EXTRA	RATE (\$)	FEE (\$)	1	RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b)	, or (c))		-		10012(0)	100 (8)	1	RAIE (9)	FEE (3)
SEARCH FEE (37 CFR 1.16(k), (i),					8		1		
(37 CFR 1.16(o), (p)	or (q))				49		100		
TOTAL CLAIMS (37 CFR 1.16(I))		minus 2	0 =		× 25 =		OR	× 50 =	
(37 CFR 1.16(h))		minus 3			×/00 =		1	× 200 =	
APPLICATION S FEE (37 CFR 1.16(s))	IZE sheets is \$250 additio	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)).					190			360	
If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL			TOTAL	
APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST					SMALL	ENTITY	OR	OTHER SMALL	
4 4/11/0	REMAINING AFTER AMENDMEN	A Minus	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDI- TIONAL FEE (\$)	h	RATE (\$)	ADDI- TIONAL FEE (\$)
Total (37 CFR 1.16)(1) Independent (37 CFR 1.16)(1) Application	1 7	Minus		-	×25 =	/	OR :	×50 =	Y
Application		.16(s))	10-	· /	× 100=	/-	OR .	×200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (37 CFR 1.18(j))					180	-/-	OR	360	
*				TOTAL ADD'L FEE	/	OR	TOTAL ADD'L FEE		
	(Column 1)		(Column 2)	(Column 3)		$\iota$	•		
OD Total	CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
Total (37 CFR 1.160)	<u>'</u>	Minus	-		×25=		OR	×50 =	1
Independent (37 CFR 1,16(h))  Application		Minus	•••	-	×200=		OR".	×200=	
								1.41	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I))					180	-	OR	360	1
* *					ADD'L FEE		OR	TOTAL ADD'L FEE	
" If the "High	in column 1 is less est Number Previou est Number Previou st Number Previous	sly Peid For	IN THIS SPACE	is less than 20,	enter "20".	the appropriat	e box in a	column 1.	

The "Teginal number (\*Priviously rear ort (10st of independent) a use injuncts number in the programs on a normal rear formation is required by 37 CFR.1.16. The information is equired to obtain or retain a benefit by the public which is to file (end by the recollection of entire the programs of the pr